



# City of Seattle

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Gregory J. Nickels, Mayor

## **Human Services Department**

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### **Attachment 1 to RESOLUTION The City of Seattle Healthy Communities Initiative Policy Guide for the City's Public Health Efforts and Investments February 7, 2006**

Public health and community health services have a great impact on the health and well being of Seattle's residents and neighborhoods. One of the ways the City improves its residents' health is by investing in what are called enhanced public health services. King County, through Public Health—Seattle & King County (Public Health), is responsible for providing regional core public health services to residents throughout the county. Public Health's regional core services can be considered a "platform" or base of public health services that must be in place, and upon which the City of Seattle may choose to fund enhanced services. The City's investments are voluntary and are to be used for enhanced public health services benefiting Seattle residents.<sup>1</sup>

#### **The City of Seattle's vision for the health of the community**

This vision applies to all of the City's efforts to improve health conditions for Seattle's residents, as well as the City's specific investments in enhanced public health services.

*The people of Seattle will be the healthiest of any major city in the nation.*

There are many socioeconomic factors affecting the health of the community. This policy document focuses on the role of public and community health services in achieving this vision as well as on the City's more comprehensive work and investments that contribute to the public's health. The term health includes mental as well as physical health.

How successful we are in reaching this vision will be assessed in four ways. First, the City will compare Seattle's health indicators with the goals set by Healthy People

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<sup>1</sup> The City has no obligation to fund any enhanced public health service, with the exception, as delineated in RCW 70.96A.087, that a minimum of 2% of the City's share of state liquor taxes and profits must support alcohol and drug programs approved by the King County Alcoholism & Substance Abuse Board.

2010<sup>2</sup>, which is a set of national health objectives developed by the Centers for Disease Control and Prevention, the U.S. Surgeon General, and the U.S. Department of Health and Human Services, and endorsed by most states, including Washington. The overarching goals of Healthy People 2010 are to increase the quality and years of healthy life, and eliminate health disparities. Second, the City, in partnership with Public Health, will monitor health disparities. Our success in reaching the vision will be judged by how well we are meeting/exceeding Healthy People 2010 objectives and whether disparities in health outcomes are being eliminated.

Thirdly, the Human Services Department (HSD) contracts with agencies to deliver health services and programs. All HSD contracts include measurable outcomes to be achieved and HSD evaluates compliance with all contract requirements.

Finally, HSD will assure there are mechanisms by which clients of city-funded services can provide feedback and information on how well city-funded health services are addressing their needs. This information will inform HSD's program performance assessments.

## **Goals for the City's public health efforts and investments**

These goals are applicable to all of the City's efforts to improve health conditions for Seattle's residents, as well as the City's specific investments in enhanced public health services. The City of Seattle recognizes that a continuum of public and community health services is necessary. This continuum must address health needs identified by public health data across the lifespan. Recognition will be given to the differing health needs of Seattle residents, including very young children, adolescents, pregnant women and older adults. The City's efforts and investments are focused on promoting the health of the public and, particularly, of groups who experience disparities in health outcomes.

1. **Eliminate health disparities** based on race, income, ethnicity, immigrant/refugee status, gender, sexual orientation, gender identity, health insurance status, neighborhood, or level of education.

Public health data analysis reveals that there are significant disparities in health outcomes based on race, ethnicity, income, immigrant/refugee status, health insurance status and neighborhood. These disparities are consistent across most health indicators. There are also major disparities based on

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<sup>2</sup> When it is adopted, the City will use the nationally-recognized health objectives that will be promulgated to reach 2020 health goals, the successor to Healthy People 2010.

gender affecting both women and men. Although little local population-based data on sexual minorities exist, national research indicates that there are significant disparities in health outcomes and risk factors based on sexual orientation. In addition, disparities tend to be interrelated; for example, there is a correlation between race and income level. People who are part of more than one disadvantaged group that experiences health disparities may experience greater health problems.

The City intends to increase the understanding of the causes of these health disparities and obtain additional local population-based data. The City will work with Public Health, Washington State and community and mainstream health providers to improve data collection.

Although the trends of most health indicators are improving overall, disparities persist. A primary focus of the City's efforts and funding is to increase understanding of and eliminate these disparities.

**2. Promote access to clinical and preventive health services.**

The City encourages and supports evidence-based strategies to:

- promote the early detection of disease;
- increase access to primary care, dental care and specialty care for the uninsured, underinsured, and Medicaid eligible;
- improve access to preventive health services, such as education and clinical services that promote healthy sexual behaviors; and
- provide access to culturally-appropriate clinical and preventive health services in order to address health needs identified by public health data and to reach groups experiencing disparities in health outcomes including immigrants and refugees.<sup>3</sup>

**3. Protect and foster the health and well being of communities through:**

- health promotion and disease and injury prevention activities;
- preparedness for emerging public health threats; and
- promotion of safe environments and protection from environmental hazards.

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<sup>3</sup> The City will work with its contractors, community and mainstream health providers, Public Health and others to adopt and implement guidelines and standards for culturally-appropriate clinical and preventive health services such as the Culturally and Linguistically Appropriate Services (CLAS) standards.

The City promotes strong communities by fostering healthy and safe physical environments that encourage active living and social cohesion and by engaging in community-based strategies that promote public health, including evidence-based strategies for improved nutrition, increased physical activity and decreased risky behaviors. The City prepares for public health emergencies, such as pandemic influenza and bioterrorism, through integration and coordination among the regional public health delivery systems and City emergency services and infrastructure.

4. **Support other City goals** such as ending homelessness, closing the academic achievement gap, ending domestic violence, and healthy aging.

Augment health services for the homeless to improve and stabilize their health as they improve other aspects of their lives such as housing and employment. Promote access to health services that have the potential to help children succeed in school. Support strategies that prevent domestic violence. Promote good nutrition and physical activity for all.

## **The City's overall strategies to advance the vision and goals**

For all of the following strategies the City uses data to inform all of its public health efforts and investments.

1. **Investments** – Invest in enhanced public health services for the purpose of improving health outcomes for Seattle residents and communities, outcomes that could not be expected from providing core public health services alone. The City encourages, promotes and invests in promising, innovative, community-based and collaborative strategies that address disparities in health outcomes.

City investments in public health services fund:

- a. enhanced services for Seattle residents that Public Health does not provide as part of its regional core responsibilities; (e.g., Enhanced tuberculosis services for the Seattle homeless population are not regional core services provided by Public Health); or
- b. greater service levels to increase the number of people in Seattle who are served. (e.g., Seattle investments ensure that more Seattle at-risk second and third graders receive dental sealants through the community-based oral health program.)

2. **Partnerships** – Work in partnership with Public Health, the University of Washington and other public, community-based and private health-related organizations to improve the health of the community and to prevent and address public health problems. Maximize resources through public/private partnerships.

The City works in partnership with Public Health because a strong regional health department is critical to the health and well being of Seattle's people and communities. Public Health provides a rich array of regional core services and programs. It is the City's intention to help shape Public Health's services and activities in Seattle. The value of these services to Seattle is nearly \$100 million. Through the inter-local agreement between King County and the City of Seattle and through its membership on the King County Board of Health, the City works with Public Health to identify and address the public health needs of Seattle's residents and neighborhoods. The City has a strong working relationship with the University of Washington and facilitates connections between Public Health and the University in order to strategically advance the region's health and vitality. The City supports the continued connection between University research and public health practice, which historically has led to innovation and development of state-of-the art best practices.

In addition, the City works with other public, community-based, and private health-related organizations, including the King County Department of Community and Human Services, hospitals, community health centers, and organizations focused on promoting the health of groups experiencing health disparities. The City's aim is to proactively address the health needs of Seattle's residents.

3. **City services and policies affecting the public's health** – Identify and adopt policies and provide services that contribute to improving the health, safety and well being of residents, families and neighborhoods. These include human services, prevention of domestic violence and sexual assault, aging and disabilities services, access to public benefits, food assistance, child care, housing, emergency preparedness, sidewalks, walking and bike trails, parks, jobs, transportation, land use policy, indoor air quality regulations and enforcement, and emergency medical services. Just as the City's investments and efforts in public health help to advance other City goals, these other City services contribute to the health of the community.
4. **Innovation.** Look for opportunities and promising community-based and collaborative strategies to achieve the City's vision and goals. The City

welcomes new ideas, new voices, and new strategies in its approaches to addressing disparities in health outcomes and in all of the City's public health efforts and investments.

### **Policy framework and criteria to guide the City's investments in enhanced public health services**

The following criteria specifically applies to the City's investments in enhanced public health services. Prior to funding an enhanced service, the City will review the level of regional core public health services being provided to Seattle residents and the proportional distribution of resources to geographic areas and populations with the greatest unmet needs.<sup>4</sup>

Once that review is completed, the following policy framework and criteria will be used by the City to determine whether a service is an enhanced public health service that might be *considered* for City funding. Enhanced public health services funded by the City must meet all of the criteria listed in 1 through 5 below, including all of the sub-points under 4 and 5.

1. The enhanced service advances one or more of the City's four public health goals.
2. The enhanced service addresses an identified health need that is documented with public health data and is not being addressed adequately through existing public health or community efforts.
3. The enhanced service includes a coherent strategy to address disparities in health outcomes and to effectively reach the target population.
4. The enhanced service will likely result in measurable outcomes for either the community as a whole or for specific groups experiencing health disparities.<sup>5</sup>
  - a) The enhanced service improves health outcomes that would not likely result from the provision of regional core public health services alone.
  - b) The expected outcomes are justified by the investment.

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<sup>4</sup> The City will review the level of regional core services being provided by Public Health for each program area in which the City is considering funding enhanced services. In the absence of standards for service levels that are to be developed under the King County Operational Master Plan for Public Health, HSD, in consultation with public health experts, will make its best assessment of whether the County is fulfilling its responsibility to adequately provide regional core services. If necessary, HSD will work with Public Health to increase the provision of core services to target populations.

<sup>5</sup> Since many health problems, including narrowing disparities, are complex and require significant resources and time to address, measuring some outcomes will be a long-term endeavor.

5. The enhanced service must be based on sound public health, service delivery and administrative practices.
  - a) The service reflects evidence-based practices or promising innovative, community-based or collaborative strategies
  - b) The service delivery system is culturally competent and is likely to serve the target population effectively.
  - c) City funding is critical to addressing the need—no other resources are available, or City funding leverages other funds.
  - d) The investment is cost-effective. Provider costs are reasonable and justifiable.
  - e) The investment is significant enough to be administratively efficient and to yield measurable results.
  - f) There is a contracted commitment on the part of the provider to document use of City funds and to track, achieve and report outcomes and milestones.